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Bib Data Sheet

CONFIRMATION NO. 8113

<b>SERIAL NUMBER</b> 09/771,678	<b>FILING DATE</b> 01/30/2001 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2683	<b>ATTORNEY DOCKET NO.</b> 2000-024909US
<b>APPLICANTS</b> Takahiro Suzuki, Shizuoka, JAPAN;				
<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 2000-024909 02/02/2000 <i>SK</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 03/08/2001</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>SK</i> Allowance Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 16
			<b>INDEPENDENT CLAIMS</b> 4	
<b>ADDRESS</b> 30743 <i>C.R.I. update 11-5-02</i> <i>ST.</i>				
<b>TITLE</b> Mobile communication terminal and data transmission method				
<b>FILING FEE RECEIVED</b> 790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



## UNITED STATES PATENT AND TRADEMARK OFFICE

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**APPLICANTS**

Takahiro Suzuki, Shizuoka, JAPAN;

**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\***

JAPAN 2000-024909 02/02/2000

**IF REQUIRED, FOREIGN FILING LICENSE****GRANTED \*\* 03/08/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 16	<b>INDEPENDENT CLAIMS</b> 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

McGuire Woods LLP  
Suite 1800  
1750 Tysons Boulevard  
McClean ,VA 22102-4215

**TITLE**

Mobile communication terminal and data transmission method

<b>FILING FEE RECEIVED</b> 790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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